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**United States Department of Energy
Office of Hearings and Appeals**

In the Matter of: Personnel Security Hearing)	
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Filing Date: June 28, 2022)	Case No.: PSH-22-0109
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_____)	

Issued: November 9, 2022

Administrative Judge Decision

Katie Quintana, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXXXXXX (hereinafter referred to as “the Individual”) to hold an access authorization under the United States Department of Energy’s (DOE) regulations, as set forth at 10 C.F.R. Part 710, “Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material.”¹ As discussed below, after carefully considering the record before me in light of the relevant regulations and the National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position (June 8, 2017) (Adjudicative Guidelines), I conclude that the Individual’s access authorization should be restored.

I. Background

The Individual is employed by a DOE contractor in a position that requires him to hold a security clearance. In July 2021, the Individual was subject to a five-day suspension due to “unacceptable and unprofessional conduct in the workplace.” Exhibit (Ex.) 5. In October 2021, the Local Security Office (LSO) issued a Letter of Interrogatory (LOI) to the Individual, which sought information about the Individual’s personal conduct regarding his employment. Ex. 7. The Individual subsequently underwent a psychological evaluation by a DOE consultant psychologist (Psychologist) in January 2022. Ex. 8. The Psychologist determined that the Individual had “features of obsessive-compulsive personality disorder which [led] him to exhibit poor judgment, emotional instability, and untrustworthiness.” *Id.* at 6.

¹ The regulations define access authorization as “an administrative determination that an individual is eligible for access to classified matter or is eligible for access to, or control over, special nuclear material.” 10 C.F.R. § 710.5(a). This Decision will refer to such authorization as access authorization or security clearance.

Due to unresolved security concerns related to the Individual's psychological condition, the LSO informed the Individual, in a Notification Letter, that it possessed reliable information that created substantial doubt regarding his eligibility to hold a security clearance. In an attachment to the Notification Letter, the LSO explained that the derogatory information raised security concerns under Guideline I (Psychological Conditions) of the Adjudicative Guidelines. Ex. 1.

Upon receipt of the Notification Letter, the Individual exercised his right under the Part 710 regulations by requesting an administrative review hearing. Ex. 2. The Director of the Office of Hearings and Appeals (OHA) appointed me the Administrative Judge in the case, and I subsequently conducted an administrative hearing in the matter. At the hearing, the DOE Counsel submitted ten numbered exhibits (Ex. 1-10) into the record and presented the testimony of the Psychologist. The Individual introduced three lettered exhibits (Ex. A-C) into the record, and presented the testimony of four witnesses, including himself. The hearing transcript in the case will be cited as "Tr." followed by the relevant page number.

II. Regulatory Standard

A DOE administrative review proceeding under Part 710 requires me, as the Administrative Judge, to issue a Decision that reflects my comprehensive, common-sense judgment, made after consideration of all the relevant evidence, favorable and unfavorable, as to whether the granting or continuation of a person's access authorization will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.7(a). The regulatory standard implies that there is a presumption against granting or restoring a security clearance. *See Department of Navy v. Egan*, 484 U.S. 518, 531 (1988) ("clearly consistent with the national interest" standard for granting security clearances indicates "that security determinations should err, if they must, on the side of denials"); *Dorfmont v. Brown*, 913 F.2d 1399, 1403 (9th Cir. 1990) (strong presumption against the issuance of a security clearance).

The individual must come forward at the hearing with evidence to convince the DOE that granting or restoring access authorization "will not endanger the common defense and security and will be clearly consistent with the national interest." 10 C.F.R. § 710.27(d). The individual is afforded a full opportunity to present evidence supporting his eligibility for an access authorization. The Part 710 regulations are drafted to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. 10 C.F.R. § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

III. Notification Letter and Associated Security Concerns

As previously stated, the Notification Letter included a statement of derogatory information that raised concerns about the Individual's eligibility for access authorization. The information in the letter attachment specifically cites Guideline I of the Adjudicative Guidelines. Guideline I relates to certain emotional, mental and personality conditions that can impair judgment, reliability, or trustworthiness. Adjudicative Guidelines at ¶ 27. An opinion by a duly qualified mental health

professional that an individual has a condition that may impair judgment, stability, reliability, or trustworthiness can raise a security concern under Guideline I. *Id.* at ¶ 28(b). As support for citing Guideline I, the LSO cited the Psychologist's Evaluation Report (Report), which concluded that the Individual has an emotional, mental, or personality condition that can impair judgment, reliability, or trustworthiness. Ex. 1.

IV. Findings of Fact

The LSO alleged that, in August 2020, Individual twice engaged in an “unprofessional” verbal exchange with a Protective Force Officer (PFO) when entering his worksite, once “expressing...frustration with the delay” in the amount of time the PFO was taking to process entry onto the worksite, and once regarding whether the Individual came to a full and complete stop at the entry point of the worksite. Ex. 7 at 2. The Individual used an expletive during the second incident. *Id.* The Individual explained in the LOI that he was feeling pressure due to deadlines that resulted from the “COVID shutdown, [and he] was anxious to get to [his] workspace to address ongoing work obligations.” *Id.* at 2-3.

The LSO asserted that, in June 2021, several employees in the Individual's workspace reported that, during a network shutdown, the Individual became “very agitated, angry, aggressive, accusatory, demeaning, and in some cases used inappropriate language” while seeking help from information technology (IT) personnel. *Id.* at 1. According to the LSO, a coworker alleged that the Individual additionally “used his fists to pound on [three] office doors” of IT personnel. Ex. 5 at 1. As a result of the incident, the Individual received a five-day suspension. Ex. 6. In the LOI, the Individual attributed the incident to “the stress of management-imposed urgent deadlines” as well as his “then-underdiagnosed and uncontrolled Type-2 Diabetes.” Ex. 7 at 2. The Individual explained that he “realized [he] needed anger management counseling to learn better how to manage [his] emotions in a more productive and professional manner.” *Id.* at 5. As such, he voluntarily entered individual counseling in early July 2021, which he attended “weekly for about one month, biweekly for about two months, and continuing monthly” up through the date of the hearing. *Id.* He additionally sought medical care for his “uncontrolled Type-2 Diabetes.” *Id.* at 6.

In January 2022, the Psychologist evaluated the Individual and issued her Report. Ex. 8. During the evaluation, the Individual stated that his 2021 “outburst” at work was “atypical,” and he felt that it was due to a medical condition. *Id.* at 2. The Individual explained that, following the incident, he visited his physician and was diagnosed with diabetes. *Id.* He stated that he was prescribed medication and was counseled on altering his diet and exercise.² *Id.* The Individual told the Psychologist that he had not experienced another incident like the 2021 outburst since that time. *Id.*

The Psychologist reported that there were “notable inconsistencies” between how the Individual described his behavior during the August 2020 and June 2021 incidents and how witnesses to the

² The Psychologist noted that she contacted the Individual's physician, who indicated that increased irritability would have been a rare symptom for the Individual's condition. Ex. 8 at 3. The physician also told the Psychologist that the Individual had not reported “any psychiatric problems.” *Id.*

incidents described his behavior, stating that the Individual recalled his behavior as “much less intense” and “much less aggressive than the descriptions provided by others.”³ *Id.* at 3. She further noted that the Individual showed limited insight regarding the impact of his actions on others. *Id.* The Psychologist opined that the Individual’s interview revealed that “he continues to have difficulty recognizing the seriousness of his actions and understanding how others might feel in response to such behavior.” *Id.*

In addition to contacting the Individual’s physician, the Psychologist also spoke with the Individual’s personal therapist (Therapist). *Id.* The Therapist told the Psychologist that he had diagnosed the Individual with an “Adjustment Disorder Unspecified” and had conducted 11 sessions with the Individual. *Id.* He stated that they initially met once per week, decreased to bi-weekly sessions, and at the time of the January 2022 evaluation, they were meeting monthly.⁴ The Therapist stated that the goals of their treatment were to “improve anger management, learn skills to prevent and manage stress, and have greater acceptance when things were outside of [the Individual’s] control.” *Id.*

The Therapist reported that the Individual did not disclose that he had banged on doors during the June 2021 incident and noted that the Individual had “not been very forthcoming about the incidents other than to say that he was embarrassed because he had become frustrated in response to what others had done or not done.” *Id.* at 3-4. According to the Psychologist, the Therapist revealed that “issues” similar to the June 2021 incident had occurred at home in response to the Individual’s frustrations with his wife.⁵ *Id.* at 4. When the Psychologist sought the Therapist’s opinion regarding any features the Individual may display of obsessive-compulsive personality disorder, the Psychologist reported that the Therapist “conceded that [the Individual] did set exceedingly high expectations for himself and tended to be rigid and inflexible in attempting to achieve his goals.” *Id.*

Ultimately, the Psychologist opined that the Individual:

exhibited some symptoms of obsessive-compulsive personality disorder, specifically, being overly devoted to work and productivity to the point that leisure activities and social relationships were excluded, over conscientiousness and inflexibility about his values, and rigidity or stubbornness. He may have also shown perfectionism and an unwillingness to delegate unless he maintained control; insufficient information was obtained to support those characteristics. He showed a tendency to minimize his shortcomings. He took his work very seriously, perhaps too seriously at times. A focus

³ The Psychologist noted that she used the Individual’s personnel security file, including case evaluation sheets, emails, the LOI, and an enhanced subject interview of the individual, to gather information regarding the Individual’s behavior in the workplace. Ex. 8 at 4.

⁴ The Therapist did not provide the Psychologist with specific scheduling details. Ex. 8 at 3.

⁵ It should be noted that, during the hearing, the Individual, the Individual’s wife, and the Therapist disputed the accuracy of this statement. *See* Tr. at 32, 41, 122, 186. The Individual and Therapist pointed to additional inaccuracies in the Report as well. *See id.* at 29, 186.

of therapy had been recognizing the value of family, suggesting that he had deprioritized social relationships over work achievement. He had exceedingly high expectations of himself. He persisted at tasks rigidly and became frustrated when things were not done as he would have wanted. These traits had been present for most of his adult life. Although there was inadequate evidence to diagnose a personality disorder, these character traits made him vulnerable to emotional instability under conditions of stress.

Id. at 5. As such, the Psychologist concluded that the Individual had an emotional, mental, or personality condition that could impair his judgment, reliability, stability, or trustworthiness. *Id.* at 6. She recommended that the Individual attend psychotherapy for 50 minutes each week with goals of improving distress tolerance and emotional regulation, increasing flexibility when facing challenging situations, and improving work-life balance. *Id.* The Psychologist suggested weekly therapy for at least one year and until the therapist and Individual agreed that the treatment goals were met. *Id.*

At the hearing, four witnesses testified on the Individual's behalf: a colleague (Colleague), his therapist (Therapist), his wife (Wife), and the Individual himself. The Colleague testified that he had known the Individual for over 20 years in both a professional and personal capacity. Tr. at 75-76. The Colleague described the Individual as creative in fashioning solutions to problems and passionate about his work, in which he "takes great pride." *Id.* at 80. He explained that the Individual is diligent, focused, has a strong work ethic, and maintains an "encyclopedic knowledge" of his craft. *Id.* at 78-79. The Colleague noted that the Individual has consistently maintained a strong work-life balance and is involved in his community as well as outdoor recreational activities. *See id.* at 82-83, 106. He additionally testified that the Individual had apprised him of the June 2021 incident, including the banging on the doors, and he noted that, due to the frustration present in the line of work that he and the Individual perform, his has seen "cursing and banging" from various employees "on more than one occasion." *Id.* at 84-85.

The Wife testified that she had been married to the Individual for 36 years. *Id.* at 115. She described the Individual as "someone people like to be around," having a "gentle heart," and being "very strongly opinionated." *Id.* at 139-140. The Wife testified that the Individual is highly active in his church and community, engaging in various volunteer programs. *See id.* at 129-133. She further explained that he enjoys outdoor activities and frequently engages in outdoor outings with friends and family. *Id.* at 130.

Regarding the time prior to the June 2021 incident, the Wife noted that the Individual "had a lot of demands made on him, and he was constantly getting phone calls and demands to work long hours." *Id.* at 118. She observed that the Individual was "having a hard time...because there were so many demands," to a level of which she had never seen him subjected to previously. *Id.* at 118, 120. The Wife observed that, because of the demands that were placed upon him, he did not have time for his outdoor activities or typical stress relievers. *Id.* at 141. Additionally, she noted that the Individual was not eating or sleeping well. *Id.*

The Wife testified that despite the pressures she saw him feeling from work, the Individual's behavior remained stable at home. *Id.* at 120. She stated that, following the June 2021 incident, the Individual came home "very sad." The Wife testified that he told her, "I shouldn't have handled it the way I did. I really feel that...I was just too strong, and I...have to apologize." *Id.* at 123. She noted that since the Individual has been in counseling, she has noticed that he is not "internalizing" his frustration anymore. *Id.* at 128. The Wife stated that his body language is calmer, and the Individual has gained tools that have helped him manage frustration. *Id.* at 128-129.

The Individual testified that, for several months leading up to the June 2021 incident, he had "been under increasing pressure to complete a number of projects," both his own and those of others. *Id.* at 161. He explained that due to disagreements related to the projects, there was a "collision of demands and stress and priorities all being intertwined." *Id.* The Individual stated that he went to his managers to express his concerns, "but they were not being heard," and due to a number of factors, the Individual felt that "the stress that was put upon [him] during that time period was unlike the normal stress associated with [his] job prior to that time." *Id.* at 163. As such, he explained that it was unlikely that he would ever have that level of stress again, and given the tools that he gained through therapy, he stated that he would not "allow [himself] to be placed back into that kind of pressure situation." *Id.* at 164. The Individual testified that, since the June 2021 incident, he has not engaged in any problem behavior in the workplace. *Id.* at 155.

The Individual testified that, after a "few days of reflection" following the June 2021 incident, he realized that he needed counseling for anger management and stress. *Id.* at 154. The Individual testified that he began counseling with the Therapist in early July 2021, and he and the Therapist engaged in weekly sessions for several months. *Id.* at 156-157. Eventually, the Individual stated, the sessions became bi-weekly, until the Therapist stated that he had seen progress in the Individual's therapy and asked the Individual if he would like to continue with the sessions.⁶ *Id.* at 157. The Individual testified that he told the Therapist that he wanted to continue with counseling, and the Therapist suggested that they meet monthly in order "to continue to put into practice what [the Individual had] been learning." *Id.* at 158. The Individual testified that the Therapist told him that he had gone beyond meeting the goals and objectives of therapy, and the monthly meetings were "icing on the cake." *Id.* at 197.

The Individual noted that when he received the Psychologist's Report in approximately April of 2022, he showed the Report to the Therapist and asked if they should increase the frequency of their sessions to weekly. *Id.* The Individual stated that the Therapist told him that they "had met the goals and objectives" and the Therapist "didn't see anything to be gained that [they] were not already gaining with [the] monthly schedule." *Id.* The Individual stated that he has continued in therapy as of the date of the hearing and has a session scheduled following the date of the hearing. *Id.* at 192.

⁶ The Individual could not recall any specific dates or timeframes for the change in frequency of his counseling sessions. Tr. at 157-158.

The Individual testified that, upon beginning therapy, he “had a hard time admitting to [himself] the severity of what [he] had done” during the June 2021 incident, but through “counseling and reflection,” he was able to articulate “how much of a jerk” he had been during the incident. *Id.* at 153-154. He explained that he can now articulate his culpability, recognize how it impacts others, and know that it will not happen again. *Id.* at 167. The Individual additionally stated that he had a hard time sharing the details of the incident as he was embarrassed and did not want to admit what he had done. *Id.* at 158. He noted, however, that, through therapy, he became more “self-aware,” and he and the Therapist were able to focus on ensuring that a similar incident would not occur again. *Id.* at 159.

In addressing the specific tools he learned in therapy, the Individual explained that he and the Therapist discussed the “escalatory ladder” that occurs when a person becomes angry and how to recognize and mitigate it. *Id.* He detailed six actions that he takes to control his anger and explained how he is working on setting boundaries and expectations for those around him. *Id.* at 160. The Individual also explained that, through therapy, he now realizes that although he can “perform at a very high level,” he cannot “do everything.” *Id.* at 164. He noted that one of the “biggest” techniques he has learned is taking a deep breath, counting to ten, and then counting again. *Id.* at 165-166. The Individual stated that “it’s just taking a moment to let” the stressor pass, and when it passes, he can think constructively about alternatives to the situation, whether he can resolve the situation, or whether the situation is out of his control and something he must accept. *Id.* at 166. The Individual provided an example of a stressful situation in his personal life in which he implemented the tools he had learned in therapy to successfully and calmly managed a frustrating and difficult situation. *See id.* at 168-171.

The Therapist testified that he began meeting with the Individual, on a weekly basis, for therapy in early July 2021. *Id.* at 18. He explained that, when he saw the Individual making progress, sessions became bi-weekly, and once the Therapist felt that the therapeutic objectives had been met, the Individual requested that therapy continue monthly. *Id.* The Therapist noted that, initially, the Individual did not provide specific details regarding the June 2021 incident, but the Therapist explained that he did not feel that details were “necessary.” *Id.* at 19.

The Therapist described the Individual as “very receptive” to therapy. *Id.* at 22. He explained that the Individual did not want to continue to function in a manner that was leading to detrimental incidents in his life, and as such, he was “very compliant” and successfully utilized the tools he learned in therapy. *Id.* at 22. He noted that the Individual has become less guarded since they first met and has been “more open” through the progression of therapy. *Id.* at 33. Although the Therapist noted that he still is unaware of everything that transpired during the June 2021 incident, he noted that this information is not important to him as the focus of treatment was not what happened in the past, but, rather, learning how to mitigate stress and anger. *Id.* at 34.

The Therapist testified that he diagnosed the Individual with “an adjustment disorder unspecified.” *Id.* at 20. In order to help the Individual cope with stress, the Therapist explained that he and the Individual worked on meditation, breathing exercises, progressive relaxation, and other techniques that would aid the Individual in dissipating rising tension. *Id.* at 21. He added that he helped the

Individual learn to advocate for himself and implement boundaries when stressors were becoming too invasive. *Id.* The Therapist opined that if the Individual continues to utilize the tools and strategies he learned in therapy, it is “not likely” that the Individual will experience “an event cascading into something big.” *Id.* at 36.

In turning the Psychologist’s conclusion that the Individual had features of obsessive-compulsive personality disorder, the Therapist opined that it is not unusual for these characteristics to be “found in people that are high-achieving individuals,” but he did not feel that the Individual displayed these features with “severity.” *Id.* Overall, the Therapist expressed that he felt that the Psychologist perhaps misinterpreted his observations and overstated the degree to which the Individual displayed any features of obsessive-compulsive personality disorder. *See id.* at 28-31. Nonetheless, he testified that he felt that the Individual had successfully met each of the treatment goals recommended in the Psychologist’s Report. *Tr.* at 37.

The Psychologist testified after observing the hearing and listening to the testimony of the witnesses. The Psychologist clarified that she did not diagnose the Individual with obsessive-compulsive personality disorder, but she “pointed out that he had traits of that.” *Id.* at 200. She explained that her reasoning for not reaching a diagnosis was because the Individual did not meet of the criteria for a diagnosis, but also because she had only performed one interview with the Individual and felt she needed more information to reach a diagnosis. *Id.* She additionally noted that she relied on information provided to her by the Therapist, “the person who knew him better,” and when she “put all that information together,” it appeared to her that the concerning characteristics “had been long-standing, and [were] appearing not just at work, but also at home.” *Id.* at 202.

Based upon what she heard from the Therapist and the Individual during the hearing, the Psychologist felt that the Individual was “able to articulate the...kind of changes that [she] would want to see.” *Id.* at 204. However, the Psychologist expressed concern regarding the Individual not being as forthcoming as she would like to see. She felt that she had not “heard a very thorough, detailed description” of why the Therapist opined that the Individual had made progress toward treatment goals. *Id.* at 205. Additionally, the Psychologist expressed concern regarding the Therapist’s approach to treatment. *Id.* at 206-207, 211. Ultimately, the Psychologist opined that the Individual had not yet met the treatment goals she recommended in her Report, and she concluded that her original assessment regarding that the Individual’s features of obsessive-compulsive personality disorder impacting his judgment, reliability, stability, and trustworthiness had not changed. *Id.* at 209-211.

V. Analysis

I have thoroughly considered the record of this proceeding, including the submissions tendered in this case and the testimony of the witnesses presented at the hearing. In resolving the question of the Individual’s eligibility for access authorization, I have been guided by the applicable factors prescribed in 10 C.F.R. § 710.7(c) and the Adjudicative Guidelines. After due deliberation, I have determined that the Individual has sufficiently mitigated the security concerns raised by the LSO

under Guideline I of the Adjudicative Guidelines. Accordingly, I find that restoring the Individual's DOE security clearance will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.27(a). Therefore, I have determined that the Individual's security clearance should be restored. The specific findings that I make in support of this decision are discussed below.

Certain personality conditions can impair judgment, reliability, or trustworthiness. Adjudicative Guidelines at ¶ 27. An opinion by a duly qualified mental health professional that the individual has a condition that may impair judgment, stability, reliability, or trustworthiness may raise a security concern and disqualify a person from holding a security clearance. *Id.* at ¶ 28(a). Conditions that could mitigate security concerns under Guideline I include:

- (a) the identified condition is readily controllable with treatment, and the individual has demonstrated ongoing and consistent compliance with the treatment plan;
- (b) the individual has voluntarily entered a counseling or treatment program for a condition that is amenable to treatment, and the individual is currently receiving counseling or treatment with a favorable prognosis by a duly qualified mental health professional;
- (c) a recent opinion by a duly qualified mental health professional that an individual's previous condition is under control and has a low probability of recurrence or exacerbation;
- (d) the past psychological/psychiatric condition was temporary, the situation has been resolved, and the individual no longer show indications of emotional instability;
- (e) there is no indication of a current problem.

Id. at ¶ 29.

Here, the Psychologist determined that the Individual had features of obsessive-compulsive personality disorder, which led him to exhibit poor judgment, emotional instability, and untrustworthiness. *Id.* at ¶ 28(b). Additionally, the Individual was diagnosed with an adjustment disorder by the Therapist. *Id.* The Individual voluntarily entered counseling, which he attended for more than a year, and continues to participate in therapy sessions. Adjudicative Guidelines at ¶ 29(a), (b). According to the Therapist, the Individual was compliant and receptive to the Therapist's treatments and recommendations, and the Individual was able to explain the tools and techniques he gained through therapy and how he uses them in his life. *Id.* at ¶ 28(a); Tr. at 22. According to the Therapist, the Individual has met all treatment goals and objectives, and furthermore, the Individual requested that therapy continue, even after the Therapist concluded that the Individual had met the treatment goals and objectives and issued a favorable prognosis. Adjudicative Guidelines at ¶ 29(b), (c).

However, the Psychologist concluded that the Individual has not resolved the concerns related to her assessment that the Individual has features of obsessive-compulsive personality disorder,

which led him to exhibit poor judgment, emotional instability, and untrustworthiness. I am unconvinced by the Psychologist's opinion, for the following reasons. First, it appears that the Psychologist may have misinterpreted some of the information relayed to her by the Therapist, as the Therapist felt that she had overstated some of his observations, and at times, incorrectly documented certain details. Furthermore, the Psychologist herself, pointed out that the Therapist knows the Individual better, as she had only conducted one interview with the Individual and the Therapist had a relationship with the Individual extending over a year. Although the Psychologist disagrees with the Therapist's treatment approach, given the Therapist's continual and consistent relationship with the Individual, I accept his opinion that the Individual does not exhibit features of obsessive-compulsive personality disorder to the degree that the Psychologist found concerning and has successfully met his treatment goals and objectives.

Additionally, the Individual's progress in therapy appears to be evident, not only to the Therapist and the Individual, but also to the Wife, who testified to the manner in which the Individual is now able to better cope with his stress and frustration. There is nothing in the record to indicate that the Individual has engaged in any concerning behavior in the workplace since beginning his therapy, and based upon the testimony of the Individual, the Wife, and the Therapist it appears that the Individual has successfully met the treatment goals articulated by the Psychologist. Although the Individual has not engaged in weekly therapy for the span of a year, as the Psychologist suggested, the record indicates that he has been actively engaged with the Therapist for approximately 16 months. Furthermore, the Psychologist recommended that the Individual continue with therapy until the Therapist and the Individual agreed that the treatment goals had been met. In this case, not only did the Therapist testify that the treatment goals had been met, but the Individual continues to express a desire to continue the sessions. As such, I find that the Individual has successfully mitigated the security concerns associated with Adjudicative Guideline I.

VI. Conclusion

After considering all of the relevant information, favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all of the testimony and other evidence presented at the hearing, I have found that the Individual has brought forth sufficient evidence to resolve the security concerns associated with Guideline I. Accordingly, I find that the Individual's access authorization should be restored. This Decision may be appealed in accordance with the procedures set forth in 10 C.F.R. § 710.28.

Katie Quintana
Administrative Judge
Office of Hearings and Appeals